

AC. 44193

STATES OF GUERNSEY  
BOARD OF HEALTH

Wiseman



77th  
ANNUAL REPORT  
of the  
**Medical  
Officer of  
Health**

REPORT FOR  
THE YEAR 1975



# Report of the Medical Officer of Health for 1975

---

Lukis House,  
Grange,  
Guernsey.

15th December 1976

Sir,

I have the honour to present to you the Annual Report on the health of the Bailiwick of Guernsey for the year 1975.

I have the honour to be, Sir,

Your obedient servant,

C. G. WHITE,

Medical Officer of Health.

The President,  
Board of Health,  
Guernsey.

## LIST OF CONTENTS

---

	<i>Page</i>
Members of the Board of Health ... ... ... ... ... ... ...	3
Members of Staff, Public Health Department ... ... ... ... ...	4
Introduction ... ... ... ... ...	5
Geographical and Meteorological Statistics ... ... ... ...	6
Vital Statistics—1975—Summary ... ... ... ...	7
Comment—General ... ... ... ...	8
—Vital Statistics ... ... ... ...	9
—Births ... ... ... ...	9
—Stillbirths—Infant Mortality ... ... ... ...	10
—Deaths—General ... ... ... ...	10
—Non-Residents ... ... ... ...	12
—Cremations ... ... ... ...	12
—Accidental Poisoning ... ... ... ...	12
—Infectious Diseases ... ... ... ...	14
—Health Visiting ... ... ... ...	15
—Sexually Transmitted Diseases ... ... ... ...	16
Report of the Chief Public Health Inspector ... ... ... ...	16
Finance ... ... ... ...	21
Guernsey Education Council—School Medical Services ... ... ...	39
—School Dental Services ... ... ...	45
Appendices:	
I—Population Births and Deaths 1948-1975 ... ...	22
II—Population by Age Groups ... ... ...	23
III—Resident Death Occurrences by Age Groups Summary	24
IV—Resident Death Occurrences by Age Groups and Causes	26
V—Accidents, Poisonings and Violence ... ...	32
VI—Non-Resident Death Occurrences ... ...	33
VII—Cancer Mortality ... ... ...	34
VIII—Infant Deaths ... ... ...	35
IX—Health Visiting Statistics ... ... ...	36
X—Special Treatment Clinic—Male ... ...	37
XI—Special Treatment Clinic—Female ... ...	38

## MEMBERS OF THE BOARD OF HEALTH

---

Conseiller A. N. Grut, President.  
Deputy W. G. Wheadon, Vice-President.  
Deputy L. A. Mahy.  
Deputy F. Le Poidevin.  
Deputy Mrs. I. Pouteaux.  
Deputy J. A. C. de Garis, (until 26.2.75).  
Deputy Miss E. W. Lincoln, M.B.E., S.R.N.  
Mr. J. R. R. Henry, (from 26.2.75).  
J. R. Dickson, F.R.C.S., (until 30.4.75)  
Anne Robertson, F.R.C.O.G.  
C. J. Toynton, M.B., B.S., (from 1.5.75).

### Board of Health—

Chief Executive Officer and Hospital Administrator—V. E. Luff,  
M.B.E.  
Principal Nursing Officer—Miss M. E. Vincent, S.R.N.

## MEMBERS OF STAFF

---

		<i>Date of commencement of service with Dept.</i>
<i>Public Health Department</i>		
WHITE, Dr. C. G.	M.B.E., M.A., B.M., B.Ch., D.P.H., D.I.H. Medical Officer of Health	15.11.62
WITHERICK, Dr. Elizabeth H.	M.B., B.Ch., (Wales), Deputy Medical Officer of Health	24. 4.69
CAIN, Mr. H. J.	Administrative Assistant to Public Health Dept.	1. 8.70
<i>Health Inspectors</i>		
BALL, Mr. J.	M.R.S.H., M.A.P.H.I. Chief Public Health Inspector	1. 9.64
BAIRDS, Mr. J. M.	M.R.S.H., M.A.P.H.I. Public Health Inspector	14. 3.66
EDWARDS, Mr. S. R.	A.A.P.H.I. Senior Assistant Sanitary Inspector	15. 1.46
WILTSIRE, Mr. S. B. W.	M.A.P.H.I. Public Health Inspector	1. 2.71
HARDIE, Mr. C. A.	Certificated Public Health Inspector.	1. 1.75
<i>Health Visitors</i>		
LE TOCQ, Mrs. I. A. R. (formerly Johnston)	R.S.C.N., R.G.N., S.C.M. H.V.Cert.	18. 2.63
SIMON, Mrs. J.	S.R.N., S.C.M., H.V.Cert.	7. 2.66
RENIER, Miss H. M.	S.R.N., S.C.M., H.V.Cert.	1. 4.70
LANGLOIS, Mrs. M.	N.N., N.S.C.N., S.R.N., S.C.M., H.V.Cert.	15.3.71 and previously from 22.2.65 to Sept. 1969
GREEN, Mrs. M.	S.R.N., S.C.M., H.V.Cert.	13.11.72
CLEMENTS, Mrs. M.	S.R.N., S.C.M., H.V.Cert.	15. 1.73
MATTHEWS, Miss A. D.	S.R.N., H.V.Cert.	1. 1.75
<i>School Nurses</i>		
SMITH, Mrs. S.	S.R.N.	14. 2.72
ROLAND, Mrs. J.	S.R.N., S.C.M.	1. 3.72
<i>Community Nursing Team</i>		
Aeschimann, Miss D.	B.A.Hons., S.R.N., S.C.M. Nurse Co-ordinator.	13. 1.75
<i>Domiciliary Nursing Sisters</i>		
MAUGER, Miss D. H.	R.S.C.N., S.R.N., S.C.M., Q.N.	1. 1.75 (retired 12. 4.75)
BAKER, Miss P.	S.R.N., S.C.M.	1. 1.75
WEBBER, Miss L. C.	S.R.N., S.C.M.	1. 1.75
DE JERSEY, Miss A. P.	R.S.C.N., S.R.N., S.C.M.	1. 1.75
OZARD, Mrs. H. M.	S.R.N., S.C.M.	1. 1.75
RADFORD, Mrs. M. R.	R.G.N., S.C.M., H.V.Cert.	1. 1.75
SKUSE, Mrs. H.	S.R.N., Orthopaedic Nursing Cert., C.M.B.Pt. 1., N.D.N.Cert.	until 18. 7.75 6. 1.75
LE CONTE, Mrs. M. (full time team helped by part time staff)	S.R.N., S.C.M.	18. 8.75 equalling 3 full time staff.



## INTRODUCTION

---

The following paragraphs are included for those who may read this report without any background information about the area it concerns.

The administrative area is the Bailiwick of Guernsey, which comprises the islands of Guernsey, Alderney, Sark, Herm and Jethou. Guernsey is the largest of these and the most westerly of all the Channel Islands: Alderney is the most northerly and but nine miles from the coast of France. Sark, Herm and Jethou lie between Guernsey and that section of the coast of France which contains the Bay of Avranches. Alderney and Sark each have their own Parliament, the States of Alderney and the Sark Chief Pleas. This is an over-simplification which must suffice for present purposes, but the student will not lack for much more detailed information elsewhere.

The Public Health Department functions within the Board of Health. The Board is a standing committee of the States of Guernsey, deriving its powers from Guernsey legislation and responsible to the States. This independence from the central government of the United Kingdom is what the stranger to the Channel Islands finds most difficult to understand. Nevertheless it is so and some 900 years of self-government since William, Duke of Normandy gained the English Crown are sufficient proof of this.

## GEOGRAPHICAL

The Island of Guernsey is seventy-five miles from Weymouth, forty-two from Cherbourg and sixty-one from St. Malo. Its area is 25.1 square miles and its highest point is 345 feet above sea level.

## METEOROLOGICAL STATISTICS

1975

(Guernsey Airport unless otherwise stated)

*Sunshine:*

Guernsey—L'Ancrese	2097 hours *
—Airport	1960 hours

\* British Isles highest total

Sunless days—Guernsey	...   ...   53      Average 1955-1974	...   ...   62.3
-----------------------	---------------------------------------	------------------

*Rainfall:*

Total millimetres	...   ...   ...   751.0      Average 1947-1974	...   ...   865.4
Rain days 1975	...   ...   ...   157      Average 1947-1974	...   ...   177.4

*Temperature:*

	°C					
Yearly mean	...	...	...	...	...	10.7
Average 1947-1974	...	...	...	...	...	10.5
Mean daily range	...	...	...	...	...	4.9
Average 1947-1974	...	...	...	...	...	4.8

*Wind Direction* (number of days of)

Calm	N	NE	E	SE	S	SW	W	NW
9	47	52	38	28	46	43	65	37

*Vital Statistics—Guernsey only—1975*

Population estimate—mid-year—residents	...	...	...	...	...	...	...	...	...	...	...	...	...	53,200
(this figure is based on information available from the 1976 census)														
Area	...	...	...	...	...	...	...	...	...	...	...	...	...	16,062 acres
Population density	53200	...	...	...	...	...	...	...	...	...	...	...	...	3.312 per acre

														England (& Wales) Mean of past five published figures
	Number			Rate 1975		Rate 1974		Mean of 5 years 1970-1974	Highest in 5 years 1970-1974	Lowest in 5 years 1970-1974				
Deaths	634	per 1000 resident population												
		Crude	11.92	11.93	12.18	13.08	11.53	11.8						
		* Corrected	10.85	10.86	10.96	11.90	10.49	—						
Cancer mortality (all forms)	142	"	"	2.67	2.68	2.55	3.02	2.5						
Lung cancer mortality	32	"	"	0.60	0.59	0.63	0.79	0.65						
Tuberculosis mortality	1	"	"	0.02	0.04	0.04	0.08	0.03						
Live births (legitimate and illegitimate)	611†	"	"	11.48	13.28	14.75	16.22	12.90						
Live births (illegitimate only)	68	"	live births	111.29	100.15	85.38	100.15	69.02						
Stillbirths	10	"	total births (live and still)	16.10	14.51	11.91	15.38	8.74						
Infant mortality (deaths in first year of life)	9	"	live births	14.73	13.25	15.45	17.72	13.02	16.7					
Neonatal mortality (deaths in first month of life)	8	"	"	13.09	8.84	11.10	12.59	8.84	11.5					
Early neonatal mortality (deaths of infants under one week)	6	"	"	9.82	7.36	10.04	12.59	7.36	—					
Perinatal mortality (still- births & deaths of infants under one week)	16	"	total births (live and still)	25.76	21.77	21.83	24.36	17.57	21.8					
Maternal mortality	0	"	"	0.00	1.45	0.29	1.45	0.00	0.15					

\* The correction is related to the particular age and sex distribution of the island. The comparability factor is 0.91.

† includes one notification from mainland.

‘Soap and education  
are not as sudden as a massacre, but they are  
more deadly in the long run’.

Mark Twain,  
(S. L. Clemens).

1975 saw the close of a long and proud story of voluntary service to the community. On January the first, at the request of the three District Nursing Associations, the Board of Health accepted responsibility for continuing a domiciliary nursing service. Thus, at a stroke, the Health Department gained by the addition to its staff of six experienced full-time District Nursing Sisters, not to mention the part-time staff whose willingness to serve enables the necessary flexibility to be maintained. Their names are mostly well-known and while it would be invidious to single out any one, mention must be made of Miss Doris Mauger, Queen’s Nurse, whose retirement after twenty-eight years of District Nursing service (twenty-six of them in Guernsey) fell due but three months after the transfer. A few months later Mrs. M. R. Radford had to submit her resignation due to a family move away from the Island. We were very sorry to see them leave so soon.

In order to meet the diverse and scattered demands upon the Domiciliary Nursing Service, Miss D. A. Aeschimann was appointed to the newly created post of Nurse Co-ordinator. By this means it was hoped to ease the transition of responsibility without any perceptible break in the continuity of service to the community, and to build a framework upon which we dared to hope that we might equal, and later even improve upon the proud example set us by the voluntary associations.

The year 1975 is assured of its place in Guernsey history for another, but more sombre, reason. For the first time since records have been kept there was no natural increase in the population; that is to say that the number of live births failed to exceed the number of deaths occurring during the year. This excludes the years 1941 to 1945, but no-one would claim that the exodus of 1940 was any more natural than the conditions obtaining during the years of German Occupation. In 1946 there were twice as many births as deaths and in the five years 1935 to 1939 the average annual natural increase was 240. During the past twelve years the decline in the natural increase has followed the pattern shown in the table below, irregularly but inexorably failing.

Year	Births	Deaths	Natural Increase	Increase per 1000 populn.
1964	891	540	351	7.72
1965	816	568	248	5.39
1966	780	564	216	4.64
1967	741	546	195	4.14
1968	752	656	96	2.01
1969	830	643	187	3.87
1970	794	616	178	3.64
1971	768	646	122	2.47
1972	790	576	214	4.28
1973	653	593	58	1.15
1974	679	610	69	1.35
1975	611	634	-23	-0.04

At the same time the proportion of the population over the age of 65 steadily increases. The 1931 Census showed that under 10% (9.62%) of the population had passed their 65th birthday. For men the proportion was 8.8% and for women 10.4%. Forty years later  $14\frac{1}{2}\%$  (14.51%) of the population is surviving beyond the age of 65, 12% of men and almost 17% of women. Put in another way the number of resident persons aged over 65 had increased by nearly 90%, 71% of males and 104% of females over the past forty years.

Is this not as it should be? Policies and efforts have been aimed at preserving health and prolonging useful life. But these plans and all this work seem sterile if they should only result in a larger number of lonely, unhappy, half-living senior citizens. This increase can be expected to continue. If the trend is maintained at the same rate for the next twenty-five years (and the rate has altered little over the past forty) then the turn of the century will find 22% of women and 18% of men in the population over 65 years old. In July 1940 an Emergency Census was taken at the very outset of the Occupation and after all evacuation had had to stop. Excluding the few babies,  $15\frac{1}{2}$  per cent of men remaining were 65 or older and 24 per cent of women were over 60. The proportions will probably be much the same sixty years on.

Imaginative planning is needed now to solve the problems which seem bound to develop during the next twenty-five years. More bluntly, for anyone who has passed his or her fortieth birthday, we are not talking about 'them': this is about us!

On the brighter side, 1975 saw Guernsey (L'Ancresse) at the top of the sunshine league once more, with a total of 2,097 hours and the Airport in fifth place with 1,960 hours. June was the sunniest for fifty years and August the sunniest since 1945. The winter of 1974/75 proved to be the mildest of this century and then the sun shone every day from May 17th through to the 12th September—the longest period without a single sunless day ever recorded at the Airport. I am indebted to Mr. M. J. Lillington, Senior Meteorological Observer, Guernsey Airport for these facts.

### *Vital Statistics*

The estimated mid-year resident population is 53,200, being 25,600 males and 27,600 females. There was no natural increase since deaths exceeded births by 23, the first time that this has ever happened with the exception of the Occupation years. This, alas, continues a trend begun decades ago and unlikely to undergo any very dramatic change as indications are at present. The average natural increase for the five years 1970-1974 is 128 per year.

#### *Births*

There were 611 live births in 1975, 68 fewer than in 1974 and 126 fewer than the average of the five years 1970-74 (737).

The crude birth rate is therefore 11.48 per 1,000 estimated resident population, which is 3.27 per 1,000 lower than the average 1970-74 (14.75).

There were 68 illegitimate births, the same number as in 1974. Because total births are down, this gives an even higher rate—111.3 per 1,000 live births—than in 1974 (100.2) which was itself the highest for many years. The five-year average of this rate is 85.4 per 1,000 live births.

### *Stillbirths and Infant Mortality (1974 in parentheses)*

There were 9 (9) infant deaths of which 8 (6) occurred in the first month of life and 6 (5) of these died in the first seven days of separate existence. The infant mortality is therefore 14.7 (13.3) per thousand live births, the neonatal death rate 13.1 (8.8) per thousand live births and the early neonatal death rate 9.8 (7.4) per 1,000 live births. The average of the years 1970-74 for these three rates is 15.5, 11.1 and 10.04 respectively. The neonatal death rate is the highest of the past six years, the previous highest figure being 12.6.

There were 10 (10) stillbirths in 1975 giving a rate of 16.1 (14.5) per 1,000 total births (live and still). This is higher than the five year average—14.5, and the highest of those five years—15.4.

Perinatal deaths (stillbirths and deaths in the first week of life) were therefore 16 (15) giving a perinatal mortality rate of 25.8 (21.8) per 1,000 total births, which is higher than the five year mean—21.8 and the highest of those five years—24.4.

There was not one maternal death in 1975.

### *Deaths*

634 (610) deaths occurred among the resident population. The crude death rate is therefore 11.92 (11.93) per 1,000 resident population. The five-year mean of this rate is 12.18. Since the comparability factor is 0.91, the corrected death rate for 1975 is 10.85 (10.86) and the five year mean of this rate is 10.96.

#### *Mortality Experience*

The mortality pattern is much the same as that of recent years, circulatory diseases accounting for more than half (52%) of all deaths and malignancy responsible for a further 22 per cent. Together these two categories account for nearly three quarters of all deaths (74.5%). These proportions are almost an exact repetition of 1974 experience. Twelve per cent of deaths were ascribed to respiratory conditions.

Of the circulatory conditions causing death by far the majority are those directly affecting the heart, particularly among males. Coronary heart disease accounts for 46% of the 181 male deaths in this group and 31.5% of the 149 female deaths. Under the age of 65, four times as many males as females died of a heart attack (24:6). After age 65 this imbalance is redressed somewhat, but still men are more vulnerable than women in a ratio of 3 to 2 (60:41).

Circulatory diseases causing death other than those directly affecting the heart are much more evenly shared. Of the three principal causes cerebral thrombosis accounts for twelve deaths each, generalised ischaemic cerebrovascular disease nineteen men and eighteen women and aortic aneurysm nineteen men and twenty-four women.

Of respiratory diseases causing death the most striking difference between the sexes is seen in chronic bronchitis. There were 18 deaths due to chronic bronchitis—and only one of them a woman. Influenza pneumonia accounted for 16 deaths, 13 men and 3 women, but here the sex difference is hardly significant since more than half the male deaths occurred over the age of 80.

Cancer is again the second largest cause of death and of the 142 deaths due to malignancy the largest single group is cancer of the trachea, bronchus and

lung—32, or more than 1 in 5 of all cancer deaths. 25 of the lung cancer deaths were men and only 7 women. In 1974 there were 30 lung cancer deaths, 22 men and 8 women. The rates (per million population) are therefore slightly raised for men and slightly lowered for women in 1975 and, as can be seen from Appendix VII, can stand favourable comparison with the same rates for our nearest neighbours and for England and Wales. The margins are minimal though and since probably twelve out of every thirteen cases of lung cancer are avoidable, all the rates are unacceptably high.

So our mortality experience repeats itself once again, with the outstanding features of high mortality among men from coronary heart disease, chronic bronchitis and lung cancer. I suppose it is expecting too much to hope that the fatal part which cigarette smoking has to play will receive proper recognition. If these premature deaths were recorded as due to violence, or poisoning—or even suicide—there would soon be an outcry to some effect. As it is, expect nothing to be done nor any decision made, personally or communally, that can be seen to meet the case. We are reluctant to contemplate the common factor in this mortality; how much less are we prepared to think upon the distress which precedes it.

A survey published recently† on smoking behaviour and attitudes among adults in the U.S.A. suggests that the percentage of adult smokers has decreased in the last decade. Compared with previous surveys conducted in 1964-66 and in 1970, the percentage of male and female smokers was down in 1975, except for women aged 21 to 24, women 55 and over and men 65 and over, all of whom showed a slight increase in smoking.

Survey Year	Overall % current regular smokers *	
	Men	Women
1964-66	52.4	32.5
1970	42.2	30.5
1975	39.3	28.9

(\* 'Current regular smoker'—a person who has smoked at least 100 cigarettes during his/her lifetime and who now smokes cigarettes).

Differences in smoking behaviour were also found by marital status and by occupational and educational levels. An interesting observation was that most current smokers (more than 3 in 5) had made at least one serious attempt to stop smoking entirely. Nine out of ten smokers said that they had either tried to stop smoking or would probably do so if there were an easy way.

No survey can include every member of so large a population, but this one certainly suggests that, in the United States, the dynamic of choice is strongly in favour of giving up the cigarette habit. If there is, as so many smokers claim, no easy way to discontinue smoking, then certainly the difficulties are exaggerated. It is all too easy to become discouraged, but the challenge is well worth taking up and the rewards are considerable. A little extra determination and you may be surprised to discover how easy it is to succeed—not how difficult.

In 1975 provisional figures for England and Wales show a fall in the number of deaths from cancer of the lung, the first drop in at least fifty years. The reduction is confined to males but exceeds the continuing increase in mortality

---

† (Morbidity & Mortality, 1976, 25, Nos. 30 & 31 U.S. Center for Disease Control).

from this cause among women only because of the much greater number of lung cancer deaths experienced by males. In fact the reduction is 1.3% of the 1974 figure for males, compared with an increase of 2.6% female deaths—England and Wales. In Guernsey male deaths are up by 9.2% of the 1974 figure and female deaths down by 15.6%.

Accidents, poisoning and violence (Group NXVII) accounted for a total of 20 deaths (19 in 1974). 12 males were involved and 8 females (13 and 6 in 1974). 8 deaths concerned traffic or vehicle accidents (7 male, 1 female). 4 were due to falls (2 each), 2 males died in fires and one drowned. There was one recorded suicide.

#### *Deaths—non-residents*

Appendix VI records the 30 deaths which occurred among visitors to Guernsey during 1975. Circulatory diseases accounted for 19 (13 men and 6 women), 'heart attack' being the predominant reason. 4 women died of cancer while visiting the Island and 4 persons (2 male, 2 female) died following acute abdominal emergencies. 3 men drowned.

#### *Cremations*

A total of 234 cremations took place in 1975 including 12 requested from elsewhere. The 'resident' total of 222 continues the steady upward trend of recent years.

1975	222	(12)	35.0% of deaths
1974	218	( 8)	35.7% " "
1973	206	( 4)	34.6% " "
1972	213	( 4)	37.0% " "
1971	212	( 5)	32.8% " "
1970	177	( 7)	28.7% " "

(The smaller numbers in brackets refer to cremations carried out in Guernsey in response to requests from elsewhere, which are not included in the unbracketed total).

For the past four years cremation has been elected for more than one in every three disposals of resident dead. Cremation has much to commend it in preference to its alternatives, but this is an intensely personal choice in the view of many. Those who, like myself, believe that cremation represents the procedure of choice, must not lose patience with the slowness by which the proportion increases, but rather take comfort from the fact that the proportion is increasing.

#### *Accidental Poisoning—Children*

There were fewer instances of accidental poisoning in childhood than in 1974. Thirty-six children were admitted to the Princess Elizabeth Hospital with known or suspected poisoning. Twenty-four were discharged on the same day; twelve were detained overnight. No case proved fatal. The first quarter of the year was the worst with thirteen cases. The age range was eleven months to 10 years old, but predominantly under five years old.

The range of poisons was much the same as in previous years, predominantly medicines in tablet or capsule form (19). A liquid medicine was chosen by one child. Domestic fluids, and berries each claimed five victims and alcohol tempted three. One child tried rat poison, a second ate 'mushrooms' and a third survived

suspected poisoning of unknown cause. The victims of medicines, domestic fluids and alcohol (28 cases) might have been saved from an experience, equally alarming to child and parent, if the possibility of poisoning had been visualised before the poison was swallowed. The berries, rat poison and mushroom cases were probably harder to prevent, for a child's natural curiosity will lead him to take unimagined risks.

	1975			1974				
	M	F	Monthly Total	Quarterly Total & to date	M	F	Monthly Total	Quarterly Total & to date
Jan	4	3	7		—	—	—	
Feb	—	1	1		4	3	7	
Mar	4	1	5	13/13	—	1	1	8/8
April	1	—	1		6	—	6	
May	4	—	4		2	1	3	
June	1	1	2	7/20	1	2	3	12/20
July	2	3	5		9	1	10	
Aug	1	1	2		—	1	1	
Sept	2	—	2	9/29	—	—	—	11/31
Oct	1	3	4		5	3	8	
Nov	1	—	1		1	—	1	
Dec	1	1	2	7/36	—	3	3	12/43
Totals	22	14	36		28	15	43	

**NOTIFIABLE INFECTIOUS DISEASES**

The following infectious diseases were notified in the months shown.

DISEASE	1975	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	TOTAL
		1	2	3	1	2	3	1	2	1	2	1	2	12
Food poisoning														6
Infective jaundice														13
Measles	2	1												
Scarlet fever	1	2												
Tuberculosis														5
Whooping cough														
	5													
		4	2	4	1	4	10	5	7	2	4	4	52	
	9													

As can readily be seen, no notifiable infectious disease reached epidemic proportions or anywhere near it. The scatter through the year is remarkably even. It was disappointing to receive five notifications of pulmonary tuberculosis, but two were known 'old' cases who suffered relapses and the three others were all demonstrably instances of past unknown infection breaking down—in one case fatally.

The low incidence of food poisoning during so long a summer is gratifying but scant cause for complacency. The only true defence against food poisoning is good food hygiene and constant vigilance.

No link could be found among the cases of infective jaundice notified although one has an uncomfortable feeling that some common factor may have played a part. One case proved fatal, as last year. In 1975 a boy under school leaving age; in 1974 a woman in her early forties.

One death was ascribed to psittacosis although no such infection was notified. This is explained by the fact that the coding of causes of death can take post-mortem information into account, when this is available. With the advantage of hindsight it is sometimes possible to understand disease processes somewhat better than the presentation *in vivo* allows. After much discussion with the consultant pathologist, in the light of the results of laboratory findings both inside and outside the Island, this death (a male in his late thirties) was ascribed to psittacosis.

It should be remembered that the coding of causes of death is based upon the earliest event in the direct series of consecutive events leading to death, and so the obvious reason for death (particularly to the layman) may not be reflected in the coding. Psittacosis used to be thought of as something of a rarity, certainly foreign—if not exactly exotic; it is now recognised as something much nearer home and as likely to affect the force-fed turkey as the home-bred budgerigar. Human cases, fortunately, remain relatively uncommon and deaths from psittacosis are not a frequent feature of human mortality in temperate climates by any means.

Readers of past reports will think that the total of 52 notifications of infectious disease is a considerable increase by comparison with previous years. It is, but the difference has more to do with the procedure for notification than the incidence of infectious disease. The procedure for notification has been improved and it is probably fair to say that the picture presented by the table heading this section is as near accurate as it is reasonable to expect. It reflects, I suspect, an average—or even below average year for infectious diseases, certainly not an abnormal year.

#### *Health Visiting*

We welcome Miss A.D. Matthews S.R.N., H.V.Cert. who joined the staff on January 1st, 1975, bringing the establishment of Health Visitors up to full strength once more.

At Appendix IX can be seen the record of health visiting during the year, an uninspiring catalogue, alas, of much rewarding and skilful activity in human relationships and preventive medicine. Visits concerning pre-school and school children are somewhat lower this year compared with 1974, but general health visiting and clinic sessions show increases. These changes do not indicate any trend or change of policy so much as the balance of demand during the year.

Comparison of consecutive years is not particularly fruitful for the pattern of service is governed principally by the pattern of demand and the factors governing that are legion.

### *The Sexually Transmitted Diseases*

Appendices X and XI record the work of the two special treatment clinics conducted by Drs. J. E. T. Strickland and W. R. Cambridge. In his letter accompanying these returns, Dr. Strickland rightly draws attention to the horrifying figure of eighteen new cases of syphilis which occurred during 1975. Fortunately syphilis is curable with present day drugs, but it can only be cured if it is diagnosed and this means seeking medical advice. One wonders how many people nowadays appreciate the appalling consequences of untreated venereal disease, particularly syphilis.

Total attendances at the male clinic were down by nearly 8%, but up by over 40% at the female clinic. Over half the male cases occurred among twenty year olds, but 44 cases, almost a quarter, concerned teenagers. At the female clinic half the new infections occurred among twenty year olds, but 32 cases—nearly 40 per cent—concerned teenagers and four cases were under sixteen years old.

Is this in spite of—or because of—the preoccupation with sex education in this enlightened age? Certainly something is amiss somewhere for figures like these. How many more cases may have attended for treatment elsewhere one can only guess, but it is a disquieting contemplation. It is most earnestly to be hoped that no case has gone without treatment.

## REPORT OF MR. J. BALL, CHIEF PUBLIC HEALTH INSPECTOR, FOR THE YEAR 1975

### INTRODUCTORY

The year 1975 was an average one for the Public Health Inspectorate. There were 1366 complaints and requests for advice and guidance received and recorded in the department (1470 in 1974).

An Ordinance of the States entitled The Food and Drugs (Food Hygiene) Ordinance, 1975 was made on 24th September, 1975 (under the powers contained in the Food & Drugs (Guernsey) Law 1970). This Ordinance, when operative (1st January, 1976) will be an invaluable asset, not only to the inspectorial staff but also to the general community in setting guidelines and standards expected to be attained in all food businesses.

### PERSONNEL

Mr. C. A. Hardie, from Wirral Borough Council, Merseyside Metropolitan County Council joined the department on 2nd January. We wish him well and every success.

### STATISTICAL

The following table includes classified, routine and special visits and inspections carried out by Public Health Inspectors in the general category (i.e. excluding food matters).

## CLASSIFIED VISITS AND INSPECTIONS—GENERAL

			1975	1974
Housing inspections	...	...	229	280
Houses in multiple occupation	...	...	12	9
Overcrowding complaints	...	...	21	20
Drainage—general	...	...	295	358
Drain tests applied	...	...	27	49
Septic tanks	...	...	2	13
Public sewers	...	...	32	27
Water supplies	...	...	57	37
Public conveniences	...	...	94	64
Verminous premises—visits	...	...	60	69
Disfestations	...	...	127	100
Atmospheric nuisances	...	...	63	82
Noise nuisances	...	...	14	17
Refuse accumulations	...	...	116	125
Controlled tips	...	...	15	33
Infectious disease investigations	...	...	—	9
Infectious disease other visits	...	...	1	12
Workplaces	...	...	3	5
Factories	...	...	—	2
Caravans	...	...	—	11
Camping sites	...	...	14	8
Rodent control investigations	...	...	123	82
Streams etc.	...	...	19	34
Plans inspected	...	...	57	32
Island Development Committee visits	...	...	5	11
Swimming pool water (bact.)	...	...	6	—
Swimming pool water (Cl <sup>2</sup> & pH)	...	...	154	153
Visits to Herm	...	...	5	7
Visits to Alderney	...	...	6	3
Visits to Jethou	...	...	—	1
Visits with other departments	...	...	17	41
Miscellaneous visits	...	...	183	230
Unsuccessful visits	...	...	129	76
Complaints from parochial authorities	...	...	4	13
Abandoned vehicles	...	...	4	9
Vessels	...	...	—	2

## HOUSING

Six ‘dwellings’ were formally closed during the year. (11 in 1974). Two are worthy of particular mention. One consisted of a ‘converted’ old Guernsey Motors Bus lacking space, thermal insulation and all standard amenities: a fire hazard was obvious. The other comprised a primitive stone-built structure of considerable age, but with no amenities whatever, even proper sanitary accommodation (a self-dug pit sufficing to dispose of soil waste). Perhaps even more bizarre was that access to one of the bedrooms was external!

The other four ‘dwellings’ were compounded of three cottage-type properties at Halfway, Les Banques in gross disrepair and lacking in standard amenities, and a shed, family-occupied, unfit in all respects.

## FOOD CARE AND HYGIENE, FOOD PREMISES

The following table refers to the activities of the Public Health Inspector in the field of food control, food preparation premises and food care and hygiene.

### CLASSIFIED INSPECTIONS AND VISITS—FOOD

					1975	1974
Sampling—food	...	...	...	...	95	59
—milk	...	...	...	...	2	—
—ice cream	...	...	...	...	18	1
—water	...	...	...	...	95	57
Food consumer complaints	...	...	...	...	83	97
Food complaints—other visits	...	...	...	...	137	163
Food surrender	...	...	...	...	206	233
Restaurants, cafes, etc.	...	...	...	...	286	138
Bakehouses	...	...	...	...	45	28
Canteens	...	...	...	...	10	8
Public houses	...	...	...	...	75	34
Hotels, guest houses	...	...	...	...	255	171
States Dairy & milk depots	...	...	...	...	13	22
Dairy farms	...	...	...	...	46	29
Ice cream and food registrations	...	...	...	...	14	5
Wet fish dealers	...	...	...	...	12	1
Fish and chip shops	...	...	...	...	55	35
Grocers	...	...	...	...	161	101
Greengrocers	...	...	...	...	31	5
Butchers	...	...	...	...	100	80
Confectioners (bakery)	...	...	...	...	15	10
Vending machines and sites	...	...	...	...	—	—
Kiosks (beach, etc.)	...	...	...	...	56	38
Food factories	...	...	...	...	71	52
Retail markets	...	...	...	...	3	32
States markets	...	...	...	...	22	
Mobile vehicles	...	...	...	...	16	12
Packing stations	...	...	...	...	1	—
Wholesale/storage depots	...	...	...	...	38	39
Visits with other departments	...	...	...	...	111	102
Miscellaneous visits	...	...	...	...	325	196
Unsuccessful visits	...	...	...	...	164	51
Food poisoning—investigations	...	...	...	...	10	6
Food poisoning—other visits	...	...	...	...	44	—
Supervision of destruction of food	...	...	...	...	99	121
Examination of food	...	...	...	...	20	7
Airport	...	...	...	...	4	—
Visits re dog biscuits	...	...	...	...	52	—
Slaughterhouse	...	...	...	...	3	4
Food hygiene lectures	...	...	...	...	5	11

### FOOD COMPLAINTS

There were 83 such complaints (97 in 1974). All were dealt with informally.

### *Comment*

Dog biscuits—a complaint was made to the department about a packet of dog biscuits, purchased at one of the supermarkets, and found to be infested with Australian Spider Beetle. As a result of this complaint a total of 52 visits were made to supermarkets, wholesalers and storage depots because of the risk of the beetles infesting food for human consumption. A considerable time was spent inspecting food stocks in all the premises. As a result of these investigations a total of 1798 cases (about the equivalent of 4 container loads) were destroyed at the States tip and by fire.

### *Samples submitted to the States Analyst for Chemical Analysis*

Amongst the samples submitted were the following:

Bread	Electric toaster—contamination
Prunes	Child's chair
Sardines	Beef
Well waters	Nuts and raisins
Sausage meat	Prawns
Pate	Soft drinks
Fish	Baked beans

Following the results of the analyses, which were mainly negative or accountable, the complainants and enquirers were advised.

Doubtful or outdated food stocks were all destroyed or withdrawn from sale by the voluntary co-operation of the manufacturers and retailers concerned.

### *Samples taken for Bacteriological Examination*

194 samples were taken, the majority comprising fish, shellfish, well and borehole water. Few unsatisfactory results were recorded, and these were referred to enquirers and producers, with appropriate recommendations.

### *Food stuffs Voluntarily Surrendered*

Amongst the main items taken into surrender were the following:

Bacon ...	...	...	...	...	1046	lbs.
Beef ...	...	...	...	...	2474	lbs.
Poultry ...	...	...	...	...	748	lbs.
Assorted meats ...	...	...	...	...	1128	lbs.
Tinned meats ...	...	...	...	...	402	lbs.
Pork ...	...	...	...	...	1023	lbs.
Fish ...	...	...	...	...	4923	lbs.
Frozen foods ...	...	...	...	...	12032	packets—6364 in 1974
Cheese ...	...	...	...	...	5673	lbs. —1942 in 1974
Chocolate ...	...	...	...	...	691	cases
Dog biscuits ...	...	...	...	...	2104	cases
Fruit ...	...	...	...	...	3287	lbs.
Creamed rice ...	...	...	...	...	2498	lbs.
Bread dough ...	...	...	...	...	459	cases
Miscellaneous items ...	...	...	...	...	431	tins etc.

### *Comment*

It should be noted that there was a sharp increase in the amounts of cheese and packets of quick frozen foods surrendered. No comment can be offered on the sharp increase in frozen foods surrender, but the cheese surrendered is believed to be a non-selling line under trial marketing and manufactured by a firm of national repute.

### DISINFESTATION

Regrettably, the human flea scourge shows no sign of a desirable reduction in numbers of cases of notification. 127 infestations (100 in 1974) were reported and appropriate disinfection carried out, principally by the rodent control staff.

### ALDERNEY

This island was visited on six occasions in response to requests.

### HERM

Herm was visited on five occasions by a Public Health Inspector on routine matters. (Please see comment under Rodent Control).

### RODENT CONTROL

2871 complaints were received: subsequent treatments and re-treatments were carried out (2752 in 1974).

Percentage categories were as follows:

Scheduled sector ... ... ... ... ...	40.5%	(40% in 1974)
Non-scheduled sector ... ... ... ... ...	59.5%	(60% in 1974)

NOTE: Broadly speaking 'the scheduled sector' refers to premises and places which are domestic or States occupied: the non-scheduled sector refers principally to commercial and business premises.

1. There were, realistically, no signs of 'Warfarin resistance': the odd case has been reported where destruction has taken longer than normal (rat subjectivity?): in such remote cases the interposing and interchanging of rodenticides has proved successful.
2. Mice are becoming somewhat of an unnecessary problem: being such notorious nibblers, they are more difficult to kill than the rat. The Board, to the best of knowledge, has no statutory obligation to treat against mice. The best means of eradication is the use of the simple breakback trap (cost about 13p) and it is felt that many complainants could help themselves more than by calling upon our departmental service which, on a cost-benefit analysis basis, is expensive. It is Public Health Department policy to ask firstly what the complainant has himself done—then to offer advice. The Public Health Department will continue, however, to help the aged, infirm and handicapped.
3. HERM island faced a major problem during the last quarter of the year: rats were found in fair abundance in the Harbour, Hotel, Tavern and Refuse Tip areas. Quick action was necessary to prevent them 'getting the upper hand'. One Inspector investigated and the Rodent Operator made three visits. Various baits were used, including 'armoured rodenticide' (a shotgun) at the Tip. Instructions were given for the further use of the rodenticides left on the island and those subsequently despatched. No further call for assistance has been forthcoming since the year's end.

## HEALTH EDUCATION

Five lectures were delivered at the College of Further Education on the subject of food hygiene to senior and junior management personnel of the principal retail food firms.

### PUBLIC HEALTH DEPARTMENT—FINANCE 1975

(The figures for 1974 are shown in brackets—adjusted to the nearest £1).

Analyst's Fees	...	...	...	...	...	...	£1609.54	(1355)
Cleaning, Fuel, Light, Water and Rents	...	...	...	...	...	3379.23	(3111)	
Infectious Diseases:								
Doctors' Fees	...	...	...	...	2163.43	(2090)		
Drugs, Vaccines etc.	...	...	...	...	3844.21	(2637)		
					6007.64			
Less Recoveries	...	...	...	...	816.51	(618)	5191.13	(4727)
Office Equipment and Furniture	...	...	...	...	...	...	804.06	(659)
Postage, Stationery and Telephone	...	...	...	...	...	2732.29	(2096)	
Rodent and Pest Control Materials	...	...	...	...	...	1185.71	(841)	
Salaries and Wages	...	...	...	...	...	115421.90	(62583)	
Special Treatment Clinic	...	...	...	...	...	7369.41	(5040)	
Staff Training	...	...	...	...	...	381.37	(316)	
Superannuation less Employees' Contributions	...	...	...	...	...	12535.21	(6010)	
Upkeep and Repair of Building	...	...	...	...	...	1036.80	(830)	
Travelling Expenses	...	...	...	...	...	11340.76	(5426)	
Welfare Foods etc.	...	...	...	...	...	582.80	—	
Other Expenses	...	...	...	...	...	1190.55	(1787)	
					164,760.76	(94,792)		
Less Recoveries from Education Council	...	...	...	...	11,500.00	(10,300)		
					£153,260.76	(84,492)		

## APPENDIX I

YEAR	Guernsey Estimated Population to middle of each year	BIRTHS		DEATHS			DEATHS Under 1 year	
		No.	Rate 1,000 per pop.	No.	Crude Rate per 1,000 pop.	Corrected Rate per 1,000 pop.	No.	Rate per 1,000 Births
1948	43,179	870	20.2	445	10.4	7.3	17	10.5
1949	44,374	795	17.9	495	11.1	7.7	20	25.1
1950	44,792	746	16.6	480	10.7	7.4	22	29.5
1951	44,498	775	17.4	510	11.4	8.0	11	14.2
1952	43,367	736	16.9	464	10.7	7.5	24	32.6
1953	44,158	727	16.5	456	10.4	7.3	23	31.6
1954	43,414	689	15.8	492	11.3	7.9	9	13.1
1955	42,073	657	15.9	423	10.0	7.0	18	26.9
1956	41,149	701	17.0	495	12.0	8.4	14	19.9
1957	40,721	725	17.8	517	12.7	8.89	24	33.0
1958	43,450	717	16.5	497	11.4	7.98	16	22.3
1959	43,950	709	16.1	498	11.3	7.91	14	19.7
1960	44,700	769	17.2	491	10.9	7.63	11	14.3
1961	45,000	757	16.8	569	12.6	8.82	16	21.1
1962	45,203	797	17.6	569	12.5	8.68	15	17.6
1963	45,339	842	18.5	542	11.7	8.21	24	28.5
1964	45,475	891	19.6	540	11.89	10.22	19	21.32
1965	45,611	816	17.9	568	12.45	10.71	16	19.61
1966	45,747	780	17.05	564	12.3	10.57	13	16.6
1967	45,884	741	16.14	546	11.46	9.83	21	28.34
1968	46,182	752	16.28	656	14.2	12.21	16	21.28
1969	46,343	830	17.91	643	13.87	11.93	14	16.87
1970	46,505	794	17.07	616	13.24	11.39	13	16.37
1971	49,399 *	768	15.55	646	13.08	11.90	10	13.02
1972	49,972	790	15.81	576	11.53	10.49	14	17.72
1973	50,552	653	12.92	595	11.77	10.71	12	18.38
1974	51,138	679	13.28	610	11.93	10.86	9	13.25
1975	53,200	611	11.48	634	11.92	10.85	9	14.73

\* Census figure.

The correction is related to the particular age and sex distribution of the Island.  
The comparability factor since 1971 has been 0.91.

APPENDIX II—POPULATION BY AGE GROUPS 1961-1971—GUERNSEY BAILIWICK

Age last Birthday	1961			1971			Percentage inc. or dec. (-) 1961-1971
	Persons	Males	Females	Persons	Males	Females	
0- 4	3706	1912	1794	4033	1994	2039	8.82 4.29 13.66
5- 9	3481	1809	1672	4324	2214	2110	24.22 22.39 26.19
10-14	4075	2076	1999	4044	2052	1992	(-)0.76 (-)1.15 (-)0.35
15-24	5706	2853	2853	7885	3984	3901	38.19 39.64 36.73
25-34	5693	2826	2867	6417	3229	3188	12.72 14.26 11.20
35-44	6011	2955	3056	6154	3030	3124	2.38 2.54 2.23
45-54	6392	3155	3237	6468	3115	3353	1.19 (-)1.27 3.58
55-64	5588	2587	3001	6611	3147	3464	18.31 21.65 15.43
65+	6447	2545	3902	7798	3113	4685	20.96 22.32 20.07
All ages	47099	22718	24381	53734	25878	27856	14.09 13.91 14.25

BAILIWICK BY ISLANDS

	Guernsey (inc. Herm and Jethou)						Alderney						Sark (inc. Brecqhou)					
	1961	Male	Female	1971	Male	Female	1961	Male	Female	1971	Male	Female	1961	Male	Female	1971	Male	Female
0- 4	3572	1829	1743	3885	1928	1957	104	62	42	123	53	70	30	21	9	25	13	12
5- 9	3337	1726	1611	4187	2148	2039	120	69	51	104	50	54	24	14	10	33	16	17
10-14	3940	2006	1934	3927	1988	1939	108	57	51	90	48	42	27	13	14	27	16	11
15-24	5487	2737	2750	7654	3876	3778	159	88	71	174	82	92	60	28	32	57	26	31
25-34	5432	2675	2757	6157	3097	3060	194	117	77	182	98	84	67	34	33	78	34	44
35-44	5737	2810	2927	5888	2888	3000	204	109	95	202	103	99	70	36	34	64	39	25
45-54	6124	3038	3086	6149	2977	3172	183	80	103	243	108	135	85	37	48	76	30	46
55-64	5267	2436	2831	6228	2976	3252	206	98	108	279	123	156	115	53	62	104	48	56
65+	6172	2414	3758	7383	2914	4469	194	97	97	289	132	157	81	34	47	126	67	59
All ages	45068	21671	23397	51458	24792	26666	1472	777	695	1685	797	889	559	270	289	590	289	301

APPENDIX III RESIDENT DEATH OCCURRENCES

Group	Cause of Death	M	F	1975 Total all ages	Grand Total	M	F	M	F	M	F	M	F	M	F
		Total Under 1	Total	1	2	3	4	5-9							
I	Infective and Parasitic Diseases	3	-	3	-	-	-	-	-	-	-	-	-	-	-
II	Neoplasms	77	65	142	-	-	-	-	-	-	-	-	-	-	-
III	Endocrine, Nutritional and Metabolic Diseases	2	1	3	-	-	-	-	-	-	-	-	-	-	-
IV	Diseases of the Blood and Blood-forming Organs	-	1	1	-	-	-	-	-	-	-	-	-	-	-
V	Mental Disorders	-	2	2	-	-	-	-	-	-	-	-	-	-	-
VI	Diseases of the Nervous System and Sense Organs	1	2	3	-	-	-	-	-	-	-	-	-	-	-
VII	Diseases of the Circulatory System	181	149	330*	-	-	-	-	-	-	-	-	-	-	-
VIII	Diseases of the Respiratory System	52	25	77	2	-	-	-	-	-	-	-	-	-	-
IX	Diseases of the Digestive System	5	11	16	-	-	-	-	-	-	-	-	-	-	-
X	Diseases of the Genito-Urinary System	2	3	5	-	-	-	-	-	-	-	-	-	-	-
XI	Complications of Pregnancy, Childbirth and the Puerperium	-	-	-	-	-	-	-	-	-	-	-	-	-	-
XII	Diseases of the Skin and Subcutaneous Tissue	-	-	-	-	-	-	-	-	-	-	-	-	-	-
XIII	Diseases of the Musculoskeletal System and Connective Tissue	1	1	2	-	-	-	-	-	-	-	-	-	-	-
XIV	Congenital Anomalies	3	3	6*	1	2	-	-	-	-	-	-	-	-	-
XV	Certain Causes of Perinatal Morbidity and Mortality	3	1	4	3	1	-	-	-	-	-	-	-	-	-
XVI	Symptoms and Ill-defined Conditions	6	14	20*	-	-	-	-	-	-	-	-	-	-	1
NXVII	Accidents, Poisonings and Violence (Nature of Injury)	12	8	20	-	-	-	-	-	-	-	-	-	-	-
		348	286	634	6	3	-	-	-	-	-	-	-	-	1

\* includes notification from United Kingdom (3 in all)

BY AGE GROUPS - SUMMARY

APPENDIX IV 1975 RESIDENT DEATH OCCURRENCES BY AGE GROUPS AND CAUSES

Group	International List No.	Cause of Death	M Total all ages	F Grand Total	1975 Under 1 yr.	M	F	M	F	M	F	M	F	M	F
						1	2	3	4	5-9					
I		<u>Infective and Parasitic Diseases</u>													
	011	Pulmonary Tuberculosis	1 -	1		-	-	-	-	-	-	-	-	-	-
	070	Infectious Hepatitis	1 -	1		-	-	-	-	-	-	-	-	-	-
	073	Psittacosis	1 -	1		-	-	-	-	-	-	-	-	-	-
		Totals: GROUP I	3 -	3		-	-	-	-	-	-	-	-	-	-
II		<u>Neoplasms</u>													
	146	Malignant Neoplasm of Oropharynx	-	2	2	-	-	-	-	-	-	-	-	-	-
	149	Malignant Neoplasm of Pharynx, unspecified	1 -	1		-	-	-	-	-	-	-	-	-	-
	150	Malignant Neoplasm of Oesophagus	1 1	2		-	-	-	-	-	-	-	-	-	-
	151	Malignant Neoplasm of Stomach	8 5	13		-	-	-	-	-	-	-	-	-	-
	153	Malignant Neoplasm of Large Intestine, except Rectum	4 9	13		-	-	-	-	-	-	-	-	-	-
	154	Malignant Neoplasm of Rectum and Rectosigmoid Junction	2 1	3		-	-	-	-	-	-	-	-	-	-
	155	Malignant Neoplasm of Liver and Intrahepatic Bile Ducts, specified as primary	1 2	3		-	-	-	-	-	-	-	-	-	-
	156	Malignant Neoplasm of Gallbladder and Bile Ducts	1 -	1		-	-	-	-	-	-	-	-	-	-
	157	Malignant Neoplasm of Pancreas	1 2	3		-	-	-	-	-	-	-	-	-	-
	159	Malignant Neoplasm of Unspecified Digestive Organs	2 1	3		-	-	-	-	-	-	-	-	-	-
	161	Malignant Neoplasm of Larynx	1 1	2		-	-	-	-	-	-	-	-	-	-
	162	Malignant Neoplasm of Trachea, Bronchus and Lung	25 7	32		-	-	-	-	-	-	-	-	-	-
	170	Malignant Neoplasm of Bone	- 1	1		-	-	-	-	-	-	-	-	-	-
	171	Malignant Neoplasm of Connective and other soft tissue	- 2	2		-	-	-	-	-	-	-	-	-	-
	172	Malignant Melanoma of Skin	- 1	1		-	-	-	-	-	-	-	-	-	-
	174	Malignant Neoplasm of Breast	- 15	15		-	-	-	-	-	-	-	-	-	-
	180	Malignant Neoplasm of Cervix Uteri	- 1	1		-	-	-	-	-	-	-	-	-	-
	182	Other Malignant Neoplasm of Uterus	- 2	2		-	-	-	-	-	-	-	-	-	-
	183	Malignant Neoplasm of Ovary, Fallopian Tube, and Broad Ligament	- 3	3		-	-	-	-	-	-	-	-	-	-
	184	Malignant Neoplasm of Other and Unspecified Female Genital Organs	- 1	1		-	-	-	-	-	-	-	-	-	-
	185	Malignant Neoplasm of Prostate	13 -	13		-	-	-	-	-	-	-	-	-	-
	188	Malignant Neoplasm of Bladder	4 1	5		-	-	-	-	-	-	-	-	-	-
	189	Malignant Neoplasm of Other and Unspecified Urinary Organs	1 1	2		-	-	-	-	-	-	-	-	-	-
	192	Malignant Neoplasm of other parts of Nervous System	1 1	2		-	-	-	-	-	-	-	-	-	-
	195	Malignant Neoplasm of Ill-defined Sites	1 -	1		-	-	-	-	-	-	-	-	-	-
	199	Malignant Neoplasm without Specification of Site	1 2	3		-	-	-	-	-	-	-	-	-	-
	200	Lymphosarcoma and Reticulum-Cell Sarcoma	2 1	3		-	-	-	-	-	-	-	-	-	-
	201	Hodgkin's Disease	1 1	2		-	-	-	-	-	-	-	-	-	-
	202	Other Neoplasms of Lymphoid Tissue	1 -	1		-	-	-	-	-	-	-	-	-	-
	205	Myeloid Leukaemia	2 1	3		-	-	-	-	-	-	-	-	-	-
	207	Other and Unspecified Leukaemia	1 -	1		-	-	-	-	-	-	-	-	-	-
	209	Myelofibrosis	2 -	2		-	-	-	-	-	-	-	-	-	-
		Totals: GROUP II	77 65	142		-	-	-	-	-	-	-	-	-	-
III		<u>Endocrine, Nutritional and Metabolic Diseases</u>													
	242	Thyrotoxicosis with or without Goitre	1 -	1		-	-	-	-	-	-	-	-	-	-
	250	Diabetes Mellitus	- 1	1		-	-	-	-	-	-	-	-	-	-
	269	Other Nutritional Deficiency	1 -	1		-	-	-	-	-	-	-	-	-	-
		Totals: GROUP III	2 1	3		-	-	-	-	-	-	-	-	-	-
IV		<u>Diseases of Blood and Blood-forming Organs</u>													
	284	Aplastic Anaemia	- 1	1		-	-	-	-	-	-	-	-	-	-
V		<u>Mental Disorders</u>													
	290	Senile and Pre-senile Dementia	- 1	1		-	-	-	-	-	-	-	-	-	-
	303	Alcoholism	- 1	1		-	-	-	-	-	-	-	-	-	-
		Totals: GROUP V	- 2	2		-	-	-	-	-	-	-	-	-	-
VI		<u>Diseases of the Nervous System and Sense Organs</u>													
	342	Paralysis Agitans	- 1	1		-	-	-	-	-	-	-	-	-	-
	348	Motor Neurone Disease	1 1	2		-	-	-	-	-	-	-	-	-	-
		Totals: GROUP VI	1 2	3		-	-	-	-	-	-	-	-	-	-
VII		<u>Diseases of the Circulatory System</u>													
	394	Diseases of the Mitral Valve	- 2	2		-	-	-	-	-	-	-	-	-	-
	395	Diseases of the Aortic Valve	1 1	2		-	-	-	-	-	-	-	-	-	-
	398	Other Heart Disease, specified as Rheumatic	2 1	3		-	-	-	-	-	-	-	-	-	-
	400	Malignant Hypertension	- 2	2		-	-	-	-	-	-	-	-	-	-
	402	Hypertensive Heart Disease	5 3	8		-	-	-	-	-	-	-	-	-	-
	404	Hypertensive Heart and Renal Disease	1 -	1		-	-	-	-	-	-	-	-	-	-
	410	Acute Myocardial Infarction	54 25	79		-	-	-	-	-	-	-	-	-	-
	411	Other Acute and Sub-acute Forms of Ischaemic Heart Disease	- 1	1		-	-	-	-	-	-	-	-	-	-
	412	Chronic Ischaemic Heart Disease	30 21	51		-	-	-	-	-	-	-	-	-	-
	424	Chronic Disease of Endocardium	- 2	2		-	-	-	-	-	-	-	-	-	-
	425	Cardiomyopathy	1 -	1		-	-	-	-	-	-	-	-	-	-
	426	Pulmonary Heart Disease	2 1	3		-	-	-	-	-	-	-	-	-	-
	427	Symptomatic Heart Disease	11 7	18		-	-	-	-	-	-	-	-	-	-
	428	Other Myocardial Insufficiency	1 4	5		-	-	-	-	-	-	-	-	-	-
		Carried forward	108 70	178		-	-	-	-	-	-	-	-	-	-

(i.e. not including visitors but including residents dying elsewhere)

Group	International List No.	Cause of Death		M	F	Total	1975 Grand Total	M	F	M	F	M	F	M	F	M	F
						all ages	Under 1 yr.	1	2	3	4						
VII	430	Subarachnoid Haemorrhage	brought forward	108	70	178	-	-	-	-	-	-	-	-	-	-	
	431	Cerebral Haemorrhage		2	-	2	-	-	-	-	-	-	-	-	-	-	
	433	Cerebral Thrombosis		9	8	17	-	-	-	-	-	-	-	-	-	-	
	434	Cerebral Embolism		12	12	24	-	-	-	-	-	-	-	-	-	-	
	436	Acute but Ill-defined Cerebrovascular Disease		-	1	1	-	-	-	-	-	-	-	-	-	-	
	437	Generalized Ischaemic Cerebrovascular Disease		1	2	3	-	-	-	-	-	-	-	-	-	-	
	438	Other and Ill-defined Cerebrovascular Disease		19	18	37	-	-	-	-	-	-	-	-	-	-	
	440	Arteriosclerosis		-	2	2	-	-	-	-	-	-	-	-	-	-	
	441	Aortic Aneurysm (non-syphilitic)		19	24	43	-	-	-	-	-	-	-	-	-	-	
	443	Other Peripheral Vascular Disease		5	6	11	-	-	-	-	-	-	-	-	-	-	
	444	Arterial Embolism and Thrombosis		-	1	1	-	-	-	-	-	-	-	-	-	-	
	445	Gangrene		1	-	1	-	-	-	-	-	-	-	-	-	-	
	447	Other Diseases of Arteries and Arterioles		1	-	1	-	-	-	-	-	-	-	-	-	-	
	450	Pulmonary Embolism and Infarction		3	3	6	-	-	-	-	-	-	-	-	-	-	
	453	Other Venous Embolism and Thrombosis		-	1	1	-	-	-	-	-	-	-	-	-	-	
		Totals: GROUP VII		181	149	330	-	-	-	-	-	-	-	-	-	-	
VIII		Diseases of the Respiratory System															
	466	Acute Bronchitis and Bronchiolitis		2	-	2	1	-	-	-	-	-	-	-	-	-	
	470	Influenza Unqualified		2	3	5	-	-	-	-	-	-	-	-	-	-	
	471	Influenza with Pneumonia		13	3	16	-	-	-	-	-	-	-	-	-	-	
	481	Pneumococcal Pneumonia		-	1	1	-	-	-	-	-	-	-	-	-	-	
	485	Bronchopneumonia, Unspecified		11	11	22	1	-	-	-	-	-	-	-	-	-	
	486	Pneumonia, Unspecified		2	3	5	-	-	-	-	-	-	-	-	-	-	
	490	Bronchitis, Unqualified		2	-	2	-	-	-	-	-	-	-	-	-	-	
	491	Chronic Bronchitis		17	1	18	-	-	-	-	-	-	-	-	-	-	
	492	Emphysema		2	-	2	-	-	-	-	-	-	-	-	-	-	
	514	Pulmonary Congestion and Hypostasis		-	2	2	-	-	-	-	-	-	-	-	-	-	
	517	Other Chronic Interstitial Pneumonia		1	-	1	-	-	-	-	-	-	-	-	-	-	
	518	Bronchictasis		-	1	1	-	-	-	-	-	-	-	-	-	-	
		Totals: GROUP VIII		52	25	77	2	-	-	-	-	-	-	-	-	-	
IX		Diseases of the Digestive System															
	531	Ulcer of Stomach		2	1	3	-	-	-	-	-	-	-	-	-	-	
	532	Ulcer of Duodenum		1	-	1	-	-	-	-	-	-	-	-	-	-	
	535	Gastritis and Duodenitis		-	1	1	-	-	-	-	-	-	-	-	-	-	
	537	Other Diseases of Stomach and Duodenum		-	1	1	-	-	-	-	-	-	-	-	-	-	
	552	Inguinal Hernia with Obstruction		1	-	1	-	-	-	-	-	-	-	-	-	-	
	553	Other Hernia of Abdominal Cavity with Obstruction		1	-	1	-	-	-	-	-	-	-	-	-	-	
	563	Chronic Enteritis and Ulcerative Colitis		-	1	1	-	-	-	-	-	-	-	-	-	-	
	569	Other Diseases of Intestines and Peritoneum		-	2	2	-	-	-	-	-	-	-	-	-	-	
	571	Cirrhosis of Liver		-	2	2	-	-	-	-	-	-	-	-	-	-	
	574	Cholelithiasis		-	1	1	-	-	-	-	-	-	-	-	-	-	
	575	Cholecystitis and Cholangitis, without mention of Calculus		-	1	1	-	-	-	-	-	-	-	-	-	-	
	576	Other Diseases of Gallbladder and Biliary Ducts		-	1	1	-	-	-	-	-	-	-	-	-	-	
		Totals: GROUP IX		5	11	16	-	-	-	-	-	-	-	-	-	-	
X		Diseases of Genito-Urinary System															
	581	Nephrotic Syndrome		1	-	1	-	-	-	-	-	-	-	-	-	-	
	582	Chronic Nephritis		-	1	1	-	-	-	-	-	-	-	-	-	-	
	590	Infections of Kidney		-	2	2	-	-	-	-	-	-	-	-	-	-	
	600	Hyperplasia of Prostate		1	-	1	-	-	-	-	-	-	-	-	-	-	
		Totals: GROUP X		2	3	5	-	-	-	-	-	-	-	-	-	-	
XIII		Diseases of the Musculoskeletal System and Connective Tissue															
	721	Osteitis Deformans		1	-	1	-	-	-	-	-	-	-	-	-	-	
	723	Other Diseases of Bone		-	1	1	-	-	-	-	-	-	-	-	-	-	
		Totals: GROUP XIII		1	1	2	-	-	-	-	-	-	-	-	-	-	
XIV		Congenital Anomalies															
	740	Anencephalus		1	-	1	1	-	-	-	-	-	-	-	-	-	
	741	Spina Bifida		-	1	1	1	-	-	-	-	-	-	-	-	-	
	742	Congenital Hydrocephalus		1	-	1	-	-	-	-	-	-	-	-	-	-	
	746	Congenital Anomalies of Heart		-	1	1	-	1	-	-	-	-	-	-	-	-	
	747	Other Congenital Anomalies of Circulatory System		1	-	1	-	-	-	-	-	-	-	-	-	-	
	759	Congenital Syndromes affecting Multiple Systems		-	1	1	-	-	-	-	-	-	-	-	-	-	
		Totals: GROUP XIV		3	3	6	1	2	-	-	-	-	-	-	-	-	
XV		Certain Causes of Perinatal Morbidity and Mortality															
	772	Birth Injury without Mention of Cause		1	-	1	1	-	-	-	-	-	-	-	-	-	
	776	Anoxic and Hypoxic Conditions not elsewhere classified		2	1	3	2	1	-	-	-	-	-	-	-	-	
		Totals: GROUP XV		3	1	4	3	1	-	-	-	-	-	-	-	-	



Group	Inter-national List No.	Cause of Death	M Total all ages	F 1975 Grand Total	M 1975 F Grand Total		M Under 1 yr.	M 1	F 2	M 3	F 4	M 5-9
					F	M						
XVI		<u>Symptoms and Ill-defined Conditions</u>										
	792	Uraemia	1 -	1	-	-	-	-	-	-	-	-
	794	Senility without mention of Psychosis	5 13	18	-	-	-	-	-	-	-	-
	796	Other Ill-defined and Unknown Causes of Morbidity and Mortality	- 1	1	-	-	-	-	-	-	-	1
		Totals: GROUP XVI	6 14	20	-	-	-	-	-	-	-	1
NXVII		<u>Accidents, Poisonings and Violence (Nature of Injury)</u>										
	854	Intercranial Injury of other and Unspecified Nature	2 2	4	-	-	-	-	-	-	-	-
	869	Internal Injury, Unspecified or Involving Intrathoracic and Intra-abdominal Organs	4 -	4	-	-	-	-	-	-	-	-
	879	Other, Multiple and Unspecified Open Wounds of Head, Neck and Trunk	1 -	1	-	-	-	-	-	-	-	-
	933	Foreign Body in Pharynx and Larynx	- 1	1	-	-	-	-	-	-	-	-
	949	Burn Involving Other and Unspecified Parts	1 -	1	-	-	-	-	-	-	-	-
	967	Adverse Effect of Other Sedatives and Hypnotics	- 1	1	-	-	-	-	-	-	-	-
	979	Alcohol in Combination with Specified Medicinal Agents	- 1	1	-	-	-	-	-	-	-	-
	980	Toxic Effect of Alcohol	- 2	2	-	-	-	-	-	-	-	-
	986	Toxic Effect of Carbon Monoxide	1 1	2	-	-	-	-	-	-	-	-
	994	Effects of Other External Causes	2 -	2	-	-	-	-	-	-	-	-
	996	Injury, Other and Unspecified	1 -	1	-	-	-	-	-	-	-	-
		Totals: GROUP NXVII	12 8	20	-	-	-	-	-	-	-	-

M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F					
10-14		15-19		20-24		25-29		30-34		35-39		40-44		45-49		50-54		55-59		60-64		65-69		70-74		75-79		80-84		85-89		90-94		95+
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
1	-	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
2	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
3	-	1	1	1	-	2	1	1	-	-	2	1	-	-	1	1	-	-	-	1	1	-	-	2	1	-	-	-	-	-				

ACCIDENTS, POISONINGS & VIOLENCE - EXTERNAL CAUSE OF DEATH (the deaths detailed below are included in APPENDIX IV categorised under the NATURE OF INJURY)

List No.	Cause of Death Group	EXVII	Sub Totals	Grand Total 1975	10-14		15-19		20-24		25-29		30-34		35-39		40-44		45-49		50-54		55-59		60-64		65-69		70-74		75-79		80-84	
					M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F				
E812	Motor vehicle traffic accident involving collision with another motor vehicle	2	2	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
E814	Motor vehicle traffic accident involving collision with pedestrian	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-			
E816	Non-collision motor vehicle traffic accident due to loss of control	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
E819	Motor vehicle traffic accident of unspecified nature	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
E830	Accident to watercraft causing submersion	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
E870	Accidental poisoning by gas distributed by pipe-line	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-		
E880	Fall on or from stairs or steps	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E881	Fall on or from ladders or scaffolding from or out of building or other structure	1	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E882	Fall on same level from slipping, tripping or stumbling	-	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E885	Fall on same level from slipping, tripping or stumbling	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E890	Accident caused by conflagration in private dwelling	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E910	Accidental drowning and submersion	1	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E911	Inhalation and ingestion of food causing obstruction or suffocation	-	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E949	Late effect of other surgical and medical procedures	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E950	Suicide and self-inflicted poisoning by solid or liquid substances	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
E980	Poisoning by solid or liquid substances, undetermined whether accidentally or purposely inflicted	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
		14	9	23	3	-	2	1	-	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	

NON-RESIDENT DEATHS - GUERNSEY 1975 (not included in main table or vital statistics)

Group	International List No.	Total all ages	Grand Total	1975		10-14		15-19		20-24		25-29		30-34		35-39		40-44		45-49		50-54		55-59		60-64		65-69		70-74		75-79		80-84		85-89		90-94	
				M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F						
II	153	-	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	183	-	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	201	-	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	253	-	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
VII	410	8	2	1	1	10	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	411	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	412	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	433	1	-	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	437	1	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	441	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	444	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	450	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	551	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	560	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	562	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	567	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
	N994	3	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
		18	12	30	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-						
IX																																							
NXVII																																							

Secondary coding of certain of above deaths where external cause is applicable

EXVII E832 E910

1	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3	-	3	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

NOTE: For explanation of the International List No. please refer to main table at Appendix IV. The following are not in the main table.

- 233 Neoplasm of unspecified nature of breast
- 551 Other hernia of abdominal cavity without mention of obstruction
- 560 Intestinal obstruction without mention of hernia
- 562 Diverticula of intestine
- 567 Peritonitis

## APPENDIX VII

### CANCER MORTALITY 1975 (and four preceding years)

#### *Cancer—all forms*

	<i>Deaths—numbers</i>		<i>Deaths per 1,000 population</i>		
	<i>Guernsey</i>	<i>Jersey</i>	<i>Guernsey</i>	<i>Jersey</i>	<i>England &amp; Wales</i>
1971	149	184	3.0	2.6	2.4
1972	131	222	2.6	3.1	2.4
1973	129	183	2.6	2.5	2.4
1974	137	172	2.7	2.4	2.5
1975	142	195	2.7	2.7	*

#### *Lung cancer deaths*

Year	<i>Deaths—numbers</i>		<i>Deaths per million population</i>		
	<i>Guernsey</i>	<i>Jersey</i>	<i>Guernsey</i>	<i>Jersey</i>	<i>England &amp; Wales</i>
1971	39	50	790	694	630
1972	37	62	740	861	646
1973	32	55	633	764	654
1974	30	53	587	736	670
1975	32	57	602	792	659**

#### *Lung Cancer—death rates per million by sex*

	<i>Guernsey</i>			<i>Jersey</i>			<i>England &amp; Wales</i>		
	<i>Male</i>	<i>Female</i>	<i>Popula-</i> <i>tion</i>	<i>Male</i>	<i>Female</i>	<i>Popula-</i> <i>tion</i>	<i>Male</i>	<i>Female</i>	<i>Popula-</i> <i>tion</i>
1971	1516	117	790	1197	217	694	1060	224	630
1972	1290	231	740	1396	352	861	1080	234	646
1973	1070	229	633	1054	488	764	1088	243	654
1974	895	301	587	1026	461	736	1105	262	670
1975	977	254	602	1311	298	792	1091**	269**	659**

\* not yet available.

\*\* provisional figure.

(Population estimate—mid 1975

Males	...	...	...	...	...	...	...	25,600
Females	...	...	...	...	...	...	...	27,600
Population	...	...	...	...	...	...	...	53,200

Estimate includes information available from 1976 census)

APPENDIX VIII  
INFANT DEATHS 1975—CAUSES

*Cause of Infant Deaths—Age under one month—1975*

<i>International Classification</i>			<i>M</i>	<i>F</i>	<i>Total</i>
465	Acute bronchitis and bronchiolitis	...    ...	1	—	1
740	Anencephalus	...    ...    ...	1	—	1
741	Spina bifida	...    ...    ...	—	1	1*
746	Congenital anomalies of heart	...    ...	—	1	1
772	Birth injury without mention of cause	...    ...	1	—	1
776	Anoxic and hypoxic conditions not elsewhere classified	...    ...    ...    ...    ...	2	1	3
			—	—	—
			5	3	8
			—	—	—

\* UK notification.

*Cause of Infant Deaths—Age from one month to one year—1975*

485	Bronchopneumonia, unspecified	...    ...	1	—	1
			—	—	—

## APPENDIX IX

### *Annual Statistics for Health Visitors 1975*

			1975	1974
<i>Pre-School children (3657 visits)</i>				
1. Primary visits age 0-1 year	...	...	571	677
2. Primary visits age 1-5 years	...	...	50	39
3. Revisits age 0-1 year	...	...	1875	2119
4. Revisits age 1-5 years	...	...	1047	1846
5. Visits relating to the 'At Risk' Register	...	...	102	29
6. Observation Register	...	...	12	—
<i>School children (291 visits)</i>				
7. Home visits	...	...	176	381
8. School visits	...	...	51	95
9. Relating to handicapped children at school	...	...	62	5
10. Other	...	...	2	—
<i>General Health Visiting (2922 visits)</i>				
11. Problem families and families with problems	...	...	534	367
12. Relating to mental health	...	...	86	77
13. Relating to physically handicapped persons	...	...	57	54
14. Infectious households (tuberculosis)	...	...	40	35
15. Infectious households (other)	...	...	136	42
16. Geriatric cases	...	...	516	437
17. Visits with doctors	...	...	1	7
18. Visits with Public Health Inspectors	...	...	9	13
19. Visits relating to ante-natal cases	...	...	72	50
20. Visits to hospital and nursing homes	...	...	56	39
21. Miscellaneous and unspecified	...	...	500	613
22. Evening visits	...	...	62	106
23. No access (i.e. non-effective visits)	...	...	853	758
<i>Clinics (total 623 sessions)</i>				
24. Ante-natal (booking) clinic	...	...	168	51
25. Parentcraft and relaxation classes	...	...	153	178
26. District Nursing Association Infant Welfare	...	...	141	146
27. Child health	...	...	132	151
28. Auditory training	...	...	20	45
29. B.C.G. (and poliomyelitis immunisations)	...	...	—	9
30. Other and unspecified clinics	...	...	9	7
<i>Meetings (130 sessions)</i>				
31. Within Health Department staff	...	...	35	102
32. With group practices	...	...	84	48
33. Miscellaneous	...	...	11	8
<i>B.C.G. Programme (259 visits)</i>				
34. Home visits	...	...	68	83
35. M.P.T. and M.P.T. readings	...	...	111	126
36. B.C.G. visits	...	...	79	97
37. Other	...	...	1	1
<i>Health Education</i>				
38. Sessions	...	...	38	41
<i>Administration (448 sessions)</i>				
39. Organisation and administration	...	...	308	352
40. Interviews at Lukis House	...	...	96	140
41. Courses, conferences, Obstetric Committee etc.	...	...	44	32

## APPENDIX X

*Special Treatment Clinic—Male Section—1975*

Venereologist: Dr. J. E. T. Strickland, MB, BS, MRCS, LRCP.

	1974	1975
1. Number of attendances	974	898
2. New infections	194	190
<i>Syphilis</i>		
Contracted locally	2	10
,, elsewhere	1	7
<i>Gonorrhoea</i>		
Contracted locally	66	58
,, elsewhere	38	28
28	30	
<i>Non specific venereal conditions</i>		
Contracted locally	93	89
,, elsewhere	54	34
<i>Non venereal conditions</i>		
Contracted locally	39	55
,, elsewhere	33	33
3. Reinfections	21	24
4. Total cases receiving treatment during year	12	9
5. Discharges during the year	13	23
<i>Syphilis</i>		
<i>Gonorrhoea</i>		
<i>Non specific venereal conditions</i>		
<i>Non venereal conditions</i>		
6. Classifications by condition—new infections 1975		

	<i>Syphilis</i>	<i>G.C.</i>	<i>NS.V</i>	<i>N.V</i>	<i>Total</i>
Local persons	2	28	34	24	88
Visiting seamen	—	2	6	—	8
Imported labour					
hotel staff	2	18	30	6	56
horticulture	—	4	12	—	16
other	6	6	7	3	22
Totals	10	58	89	33	190

### 7. Classification by age group—new infections 1975

Age groups	<i>Under 16</i>	<i>16-19</i>	<i>20-29</i>	<i>30-39</i>	<i>40+</i>	<i>Total</i>
Syphilis	—	—	9	1	—	10
Gonorrhoea	—	10	32	16	—	58
N.S.V.	—	23	51	13	2	89
N.V.	—	11	9	11	2	33
Totals	—	44	101	41	4	190

## APPENDIX XI

*Special Treatment Clinic—Female Section—1975*

Venereologist: Dr. W. R. Cambridge, MRCS, LRCP.

	1974	1975				
1. Number of attendances	227	321				
2. New infections	65	83				
Syphilis	1	8				
Contracted locally	1	7				
,, elsewhere	—	1				
Gonorrhoea	24	23				
Contracted locally	20	11				
,, elsewhere	4	12				
Non specific and non venereal conditions	40	52				
Contracted locally	38	31				
,, elsewhere	2	21				
3. Reinfections	3	6				
4. Total cases receiving treatment during year	74	89				
5. Discharges during the year	64	78				
Syphilis	1	—				
Gonorrhoea	20	20				
Non specific or non venereal conditions	43	49				
6. Classifications by condition —new infections 1975						
	<i>Syphilis</i>	<i>G.C.</i>	<i>NS/NV</i>	<i>Total</i>		
Local persons	4	11	31	46		
Imported labour						
hotel staff	4	8	17	29		
horticulture	—	4	4	8		
others	—	—	—	—		
Totals	8	23	52	83		
7. Classification by age group—new infections 1975						
Age groups	<i>Under 16</i>	<i>16-19</i>	<i>20-29</i>	<i>30-39</i>	<i>40+</i>	<i>Total</i>
Syphilis	—	2	6	—	—	8
Gonorrhoea	2	8	10	3	—	23
NS/NV	2	22	26	2	—	52
Totals	4	32	42	5	—	83

## SCHOOL MEDICAL SERVICES ANNUAL REPORT 1975

Such is the standard of knowledge and skill of our present day doctors in the research and curative fields that the investigation and treatment of the sick command universal acclaim for its excellence.

The School Medical Service, whilst not so dramatic in its results, nevertheless provides an equally essential contribution to the wellbeing of the community. This Service regards prevention as being better than cure and sets about its work by screening systematically both the pre school and the school child by identifying needs and by predicting weaknesses and handicaps. Linked to other disciplines in the educational and medical fields it provides information to ameliorate the suffering of the child whether it be real or imagined.

The facts and figures that follow are not entirely comprehensive: they cannot be in such a personal field but they do indicate the wide scope of the Service's activities. They exclude in fact the number of home visits made by the psychiatrist, health visitor, school nurse, physiotherapist and school doctor when it was thought that an appointment at Lukis House or school unsuitable for the problem in hand. Over the year there has been an increase in the incidence of these more personal consultations and it was felt that the discussions and assessments held in the home proved to be more beneficial to the worried parent and the child. Our aim is to keep abreast of the needs of the child community so as to be ready to reorientate our ideas and working day in order to meet these requirements.

A report on 1975 would be incomplete without a reference to Mr. E. G. Brett, to whom we bade farewell on his retirement from the exacting post of Assistant Education Officer. For many years Mr. Brett had bridged Health and Education efficiently and sympathetically and he will be sincerely missed.

The overall school population of Guernsey in 1975 was 9,763. This is an increase of 154 as compared with 1974.

1975	1974
1139 attendances recorded at Lukis House Clinic	995
227 attendances recorded at Child Guidance Clinic	314
67 attendances recorded at Mr. Midgley's Clinic	41
2126 attendances recorded at Speech Therapy Clinic	1933
2311 attendances recorded at Orthoptic Clinic	2300
132 attendances recorded at Immunisation Clinics	491
88 attendances recorded at BCG Clinics	150
—	—
6090 total number of attendances recorded	6225
—	—

In addition, 2531 school children were examined at a periodic medical examination (1709 at their schools and 822 at Lukis House). In 1974 these figures were 1664 in their schools and 712 at Lukis House making a total of 2376. Also 385 girls were vaccinated against German measles in their schools whereas in 1974 the figure was 357.

*Periodic Medical Examinations*

<i>Children examined in school</i>				<i>Examinations conducted at Lukis House</i>				
<i>Boys</i>	<i>Girls</i>	<i>Total</i>	<i>Total</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>	<i>Total</i>	
		1975	1974			1975	1974	
371	365	736	718	Infants	23	35	58	67
391	401	792	737	Juniors	60	55	115	94
75	106	181	209	Seniors	320	329	649	551
—	—	—	—	—	—	—	—	—
837	872	1709	1664	—	403	419	822	712
—	—	—	—	—	—	—	—	—

*Defects noted at the Periodic Medical Examinations*

	<i>Infants</i>			<i>Junior</i>			<i>Seniors</i>		
	<i>Boys</i>	<i>Girls</i>	<i>Total</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Oral hygiene	54	56	110	86	79	165	50	38	88
Eyes	30	18	48	71	66	137	32	101	133
Speech	39	18	57	16	11	27	9	5	14
Poor posture	33	25	58	56	41	97	20	54	74
Flat feet	20	14	34	21	25	46	24	36	60
Enlarged glands	31	36	67	9	10	19	7	5	12
ENT conditions	103	127	230	84	91	175	41	41	82
Asthma	8	13	21	15	7	22	6	10	16
Bed wetting	27	21	48	7	12	19	—	—	—
Over/under weight	11	12	23	25	25	50	13	33	46
Heart	10	13	23	9	15	24	9	9	18
Skin	24	35	59	35	38	73	43	38	81
Lungs	33	32	65	44	30	74	18	9	27
	423	420	843	478	450	928	272	379	651
1974 totals			899			706			727

Note the satisfactorily low figure for visual and speech defects discovered in the entrant due to the fact that these defects had been ascertained at an earlier date and appointments with the ophthalmologist and speech therapist had already been arranged.

The incidence of infection noted in the ear, nose and throat and lungs and the presence of enlarged glands must not be taken to indicate the usual general health of the child as it is variable and alters with the amount of infection the child is exposed to from day to day. We do, however, identify the children with an unhealthy predisposition to these infections and keep a keen watch on them.

We are noticing a greater tendency for mothers and their children with over-weight problems to welcome a discussion on more sensible eating and exercise. Mothers with under-weight children have always shown great concern and ask for advice about this.

### *School Clinics*

1975		1974
317 babies brought for developmental testing		318
372 attended for visual defects		258
135 attended for ENT conditions		128
94 attended for speech defects		49
22 were Training College Candidates		19
33 attended with behavioural problems		12
8 attended for assessment re future schooling		11
85 attended for routine school medicals		139
31 required a general medical examination		62
42 had orthopaedic problems	not recorded	
1139		996

As a result of these clinics

1975		1974
120 children were referred for ophthalmic treatment		125
92 were referred for ENT treatment		41
51 were referred to the Speech Therapy Clinic		54
17 were referred to Child Guidance Clinic		5
42 were referred to the physiotherapist (for advice)		16

### *Advisory Physiotherapy Service*

We have secured the part time services of Miss J. Ogier who holds clinics at Lukis House and pays home visits. She has seen 42 children (one pre school child) at Lukis House and devised for them remedial exercises to be carried out at home. She also visited 8 pre school physically handicapped children at intervals in their home and advised the mothers on handling techniques and play therapy.

## IMMUNISATION PROGRAMME

### *School Cruises*

127 typhoid vaccinations and 58 smallpox vaccinations and 65 polio immunisations were given to school children who were travelling on an Educational Cruise in 1975.

### *German Measles*

This year all the school girls in their first year at the Secondary/Grammar schools were offered vaccination against German measles. Parents were advised that whether or not they thought their daughter had had the disease they should allow their child to be immunised. Only 43 parents refused the offer. 389 children were vaccinated. We withheld immunisation for 2 children as it was discovered that they had already been vaccinated abroad. This gives us a satisfactory acceptance rate of 90% (87.9% in 1974).

### *The anti-tuberculosis programme*

Tuberculosis still ranks among the major problems in the world especially in the developing countries. In many technically advanced countries tuberculosis and its sequelae still remain more important causes of death than all the other notifiable infectious diseases combined. So we must be alert to the fact that tuberculosis has not been eradicated but still lurks around the corner. Here in Guernsey we are fortunate in having a relatively static population and that an Island-wide anti tuberculosis programme was devised many years ago and is still in being. In consequence, tuberculosis has changed from being a clinical specialty and has become a widely applied community health activity.

All Guernsey school entrants are tuberculin tested and the numbers of positive reactors give us a satisfactory estimate of the magnitude of the pool of infectious sources in the community. All school children are routinely immunised against tuberculosis (BCG'd) at the time of their junior routine school medical when they are in the last year of the junior school. They are therefore vaccinated at about 10 years of age, that is, before the onset of puberty so that the immunisation is at its strongest protective level when they are going through a period of enhanced susceptibility to the disease. The children are BCG'd earlier than this—possibly even at birth—if they become at special risk to infection either by contact to a known case of tuberculosis or if either or both parents are in employment where they might be exposed to the infection. Revaccination at school age is also offered to those who were vaccinated at birth.

Children are tuberculin tested and BCG'd either in their schools or at Lukis House and the absentees and the special risk groups are given appointments at the Friday morning BCG clinic at Lukis House.

<i>Tuberculin Testing</i>	1975		1974	
	<i>Infants</i>	<i>Juniors</i>	<i>Infants</i>	<i>Juniors</i>
Total number of children	793	907	788	831
Tuberculin testing not required	150	116	150	62
Number of children eligible for testing	643	791	638	769
BUT number of children absent	44	52	32	22
AND permission for testing refused by parent	8	16	11	16
Number of tuberculin tests performed	591	723	595	731

In addition 58 senior school children were tuberculin tested before leaving school.

### *BCGs*

Of the 723 juniors tested 697 were negative and so were eligible for BCG, but of those eligible, permission to immunise two children was withheld by the parents.

664 juniors received a BCG vaccination in their schools and 31 children were absent. But of the absentees 29 junior were BCG'd at the BCG clinic. That means that 95.3% juniors were immunised against tuberculosis (98% in 1974). In addition 54 seniors were vaccinated.

### *Hygiene inspection*

During 1975 the school nurses gave 15,392 children a hygiene inspection. They make note of general cleanliness, care, and inspect hands and feet. Out of all this number they found only 18 to be infested with head lice—a rate per thousand of 1.17 (0.63 in 1974). The school nurses still remark on the excellent grooming of

the children's hair—which nowadays, they say gleams with health and cleanliness. They also, in passing, report that hair styles among the young have again changed and that the children are, in the main, favouring shorter hair styles.

#### *Free School Milk Scheme*

A total of 191 school children received free milk in their schools. During the year 168 names were deleted from the list (either at the mother's request or because the child's height/weight ratio was satisfactory) and 23 names were added. 21 children received extra vitamins at school and 2 at home as for varied reasons their health was temporarily below par.

#### *'Vital Statistics' of senior pupils*

The school nurses have averaged out the heights and weights of all the senior boys and girls they saw—that is 329 girls and 326 boys. They have computed that the average height of these senior girls seen was 5'3" and the average weight was 115 lbs. They add that the average age for the onset of menstruation was 12 years 9 months.

As for the boys—the average height was 5'5" and their average weight 119 lbs. These are truly vital statistics of healthy young people.

#### *Child Guidance Clinic* (conducted by Dr. B. J. Salisbury, MB., MRCPsych., DCH.)

In 1975 there were 33 new referrals and 227 consultations. There was a slight increase in the number of children referred for anti-social and aggressive behaviour and, as previously noted, about one fifth were pre school children or those in the first year of school. Many of these families need considerable help and support from Mrs. Perfitt who has done an increased number of home visits.

We have also worked more closely with the Children's Officers and Mr. Welsby, and this has led to fewer consultations because, often in the past, children requiring help were being seen by two or more agencies at the same time.

It is hoped during the next year to increase the liaison we have developed with several schools, as it is important for the school to understand the child's problems, and they have given very valuable help with many families.

#### *E.N.T. Clinics* (Mr. G. Midgley F.R.C.S.—Visiting Consultant).

Mr. Midgley visited the Island in March, July and December and held clinics at Lukis House. In all he saw 67 children (41 children in 1974). As a result of these clinics he prescribed hearing aids for 6 children (two of them of pre school age) and arranged the admission and treatment of 11 children to Winchester Hospital.

#### *Audiometrist's Report* (Mrs. J. Goodwin, D.B.O.)

During 1975 numbers of school children audio-tested were as follows:

Screening tests	—	2515)	3066
Re-tests	—	551)	
Monaural failures	—	121)	= 4.8%
Binaural failures	—	64)	= 2.5%
Total failures	—	185	= 7.3%

The highest failure rate occurs during screening of infants, the lowest in the senior schools. The average failure rate remains fairly constant throughout the years for which records have been kept, i.e. between 7% and 8%.

113 children were re-examined by the School Medical Officer at audiology clinics. 22 were then referred to their family doctors. 129 audiograms were recorded at the request of family doctors.

*Speech Therapy Clinic* (Miss J. M. Richmond L.C.S.T.)

During the past 10 years the volume of work has increased considerably. However, Miss Richmond is now ably assisted two days a week by Mrs. M. Renier.

Dr. Witherick referred 115 new patients and 41 more were already awaiting attention. 110 were admitted, 22 required minimal advice and 4 failed to materialise. 282 children made 2126 attendances; 63 children were discharged after treatment. 20 children await attention.

Members of the Education Council and a student visited the clinic during the year.

*Orthoptic Clinic* (Mrs. M. Edwards D.B.O.)

There were 2,311 attendances at the clinic during the year. 119 new cases were referred to the Orthoptists by Drs. R. & B. Bonner-Morgan.

66 children were discharged from the clinic with good binocular functions. 30 were discharged as cosmetically satisfactory. Only two children ceased to attend; they have gone to live in England.

1,685 children, mostly new entrants, were screened at school for visual defects and, as a result, 120 children were referred to the Ophthalmologists for treatment.

70 squint operations were performed on school and pre school children during 1975 by Dr. R. Bonner Morgan.

*Eyesight Screening Tests* (Mrs. J. Goodwin, D.B.O.)

Visual screening tests in the infants schools, Maurepas and Valnord, are carried out by Mrs. Edwards D.B.O. All other screening tests are carried out by Mrs. J. Goodwin, D.B.O.

Screening tests were carried out on all school children seen at a routine school medical. In addition all children in their first year at the junior school were screened and also all those in secondary schools at second year level.

As a result of these preliminary tests 252 children were retested at Lukis House of whom 120 were referred to Dr. Bonner-Morgan (eye specialist).

C. G. WHITE,  
School Medical Officer.

## REPORT ON SCHOOL DENTAL SERVICE 1975

The School Dental Service was responsible during the year for approximately 9,000 children in States maintained schools plus Special Place Holders at the colleges and grammar schools.

### *Staff*

During the year one full-time dental officer resigned and left the service at the end of July. A first interview for a replacement was held on 3rd October; four people were short-listed, one only attending. This candidate was not appointed.

Meanwhile we were very fortunate to obtain the services of a local dental surgeon, Mr. T. Milner, as locum, operating at the moment two sessions (mornings) per week. This is a great help and much appreciated. A second interview was held early December again but one candidate presented for interview and he was duly appointed. I regret to say that for medical reasons this appointee has now been obliged to withdraw leaving us still without a third dental officer. The effect that this has on parents, patients, and our own staff (who have to explain the long delay between inspection and appointment) is considerable and it is to be hoped that a suitable person may be found soon.

### *Inspections*

Practically all inspections were carried out at the clinic and a total of 4297 were inspected of which 3152 needed treatment. Those needing treatment were given appointments as soon as possible, although as can be imagined, as the year progressed to its last quarter, the time between inspection and treatment increased.

### *Conservation*

As in previous years, we concentrated on conserving the permanent teeth and 5643 fillings were inserted. Compared to this 1043 fillings were inserted in deciduous teeth, these only when the cavity was in its initial stages, and the child was very young, and consequently might present space problems if their baby teeth were extracted so early.

### *Extractions*

The number of permanent teeth extracted was 1187 and these extractions were carried out because (a) gross caries, (b) overcrowding, (c) orthodontic therapy. Deciduous extractions were 2772, carried out to relieve pain, or to allow permanent successors to erupt into proper position.

### *Orthodontics*

There was again an increasing demand for orthodontic treatment and 94 appliances were fitted. Over 50 cases needing appliances were completed. As well as these cases much preventative orthodontics was carried out.

### *Crowns and Anterior Restorations*

67 crowns were fitted for the older pupils and restoration of fractured anterior teeth by the use of the resin bonded quartz fillings for the younger pupils was carried out.

### *General Anaesthetics*

General Anaesthetics were again found very useful for the very nervous patient, and where more than one tooth was to be extracted. 1487 were administered.

### *Dentures*

For the grossly carious neglected mouth dentures are unfortunately the only answer. Thirty partial and two full upper and lower were provided.

### *Equipment*

It is hoped to have the new compressor in action in the very near future. The delay in installation has been due to (a) delay in delivery time and (b) electrical difficulties associated with the local power supply being unable to take the initial surge of the one phase electrical motor. These problems have now been ironed out.

To conclude I would like to thank my colleague, Mr. Gregory, and all the auxiliary staff for their splendid co-operation and hard work throughout the year.

D. J. HEARNE,  
Principal Dental Officer.

15.1.76

---

Dental inspection and treatment carried out by the Authority during the year 1975.

---

No. of Pupils on the Registers of Maintained Primary and Secondary Schools:  
9,000 approx.

---

(1) Number of pupils inspected by the Authority's Dental Officers—			
(a) at school inspections	69		
(b) at clinic	4228	Total	4297
(2) Number found to require treatment			3152
(3) Number actually treated			4204
(4) Number of attendances made by pupils for treatment			10,589
(5) Number of patients made dentally fit			2907
(6) Sessions devoted to			
(a) school inspections	1		
(b) treatment	1695	Total	1695
(7) Fillings			
(a) permanent teeth	4785		
(b) temporary teeth	895	Total	5680
(8) Extractions			
(a) permanent teeth	1037		
(b) temporary teeth	2487	Total	3524
(9) Number of general anaesthetics given for extractions			1369
(10) Number of dentures provided			32
(11) Number of crowns fitted			66
(12) Number of root canal treatments			447
(13) Other operations			
(a) permanent teeth	320		
(b) temporary teeth	66	Total	386
(14) Orthodontics			
(a) cases commenced during the year			94
(b) cases completed during the year			54
(c) cases discontinued during the year			4
(d) number of appliances fitted			94





